MEMORANDUM

TO: All physicians

FROM: Dr. Debra Bergstrom, Hematology Laboratory Utilization Committee Chair
Division of Hematology/Division of Hematopathology

DATE: February 15, 2017

SUBJECT: **Heritable Thrombophilia Testing – Final Memo before Implementation of Guideline**

Below please find the body of the original memo dated October 6, 2016 (posted to NLMA site December 14, 2016). Thus far we have not received any feedback expressing concerns regarding the implementation of the guidelines. This memo is being submitted as a final notification prior to the implementation of the guidelines on March 1, 2017, which was moved forward a month to allow extra time for review.

The Hematology Laboratory Utilization Committee (HLUC) was formed in 2013 to promote the effective and appropriate utilization of laboratory resources.

One of our current projects is a review of the process of testing for heritable thrombophilias, which is currently not cost effective. With the assistance of Dr. Rufaro Chitsike (adult hematologist/oncologist) and Dr. Paul Moorehead (pediatric hematologist/oncologist), the committee is drafting guidelines that would direct the processing of thrombophilia testing in the coagulation and genetics laboratories.

The proposal is to restrict the requests for testing for heritable thrombophilias to individuals with expertise in the diagnosis and management of thrombosis, i.e. adult and pediatric hematologists and other specialists with expertise in thrombosis. Currently these tests are performed 500 to 800 times per year. They are positive ~5-20% of the time. Of those that are positive, there is no good evidence to justify a change in clinical practice in approximately 90-95% of cases. The rationale for this proposal is outlined in detail in supporting documents by Drs. Chitsike and Moorehead, which are available to review on request. This practice is in keeping with the standard of care in other parts of Canada. To briefly summarize, testing for heritable thrombophilias should reflect the following principles:

1. It should be performed only after appropriate genetic counselling.
2. It should be performed only for recognized indications.
3. The results should be interpreted and communicated by an individual with recognized expertise in heritable thrombophilias.

It should also be noted that these guidelines will be specific to heritable thrombophilias (i.e. testing for acquired thrombophilias such as antiphospholipid syndrome will not fall under these guidelines).

It is proposed that this will take effect in January 2017. If you have any feedback or questions, please contact me by email at debra.bergstrom@easternhealth.ca or fax at (709) 777-8374 before we move ahead with this initiative.

Sincerely,

Debra Bergstrom, MD, FRCP(C)
Division of Hematology/Division of Hematopathology, Eastern Health